VOL. XXVIII, No. 11 NOVEMBER, 1907

The California Medical Journal

D. MACLEAN, M. D., EDITOR.

Published Monthly San Francisco, Cal.

The Physician of Many Years' Experience

Knows that, TO OBTAIN IMMEDIATE RESULTS

there is no remedy like

Syr. Hypophos. Co., Fellows

Many MEDICAL JOURNALS specifically mention this

Preparation as being of Sterling worth

TRY IT AND PROVE THESE FACTS

SPECIAL NOTE.—Fellows' Syrup is never sold in bulk.

It can be obtained of Chemists and Pharmacists everywhere.

NOTICE—CAUTION.

The success of Fellows' Syrup of Hypophosphites has tempted certain persons to offer imitations of it for sale. Mr. Fellows, who has examined samples of several of these, ***finds that no two of them are identical,*** and that all of them differ from the original in composition, in freedom from acid reaction, in susceptability to the effects of oxygen when exposed to light or heat, ***in the property of retaining the strychnine in solution,*** and in the medicinal effects.

As these cheap and inefficient substitutes are frequently dispensed instead of the genuine preparation, physicians are earnestly requested, when prescribing the Syrup, to write "Syr. Hypophos. ***Fellows.***"

As a further precaution, it is advisable that the syrup should be ordered in the original bottles; the distinguishing marks which the bottles (and the wrappers surrounding them) bear, can then be examined, and the genuineness—or otherwise—of the contents thereby proved.


INFLAMMATION'S ANTIDOTE
LARGE SIZE
KEEP THE LID ON
Antiphlogistine
TRADE MARK
MADE BY
DENVER CHEMICAL MFG.
NEW YORK CITY, U. S. A.
SAN FRANCISCO
BUENOS AIRES
SOLD BY ALL DRUGGISTS
PRICE, $1.25
APPLY HOT AND THICK

Not One "Sticker" in All America.

Every Wholesale Druggist in America has since January 1st purchased full lines of *Specific Medicines* and our *specialties*, assayed and newly labeled in accordance with the National Law.

No "stickers" are on any of our preparations. *Not one Sticker in all America.* Every bottle, carton, and box from our establishment bears a regulation label *as the National Law demands.*

Every preparation of our make in any jobber's stock can be sold either now or after October 1st, 1907, in any territory or inter-State commerce anywhere.

Every bottle is labeled so that it can be *dispensed or compounded from in confidence*, now and hereafter.

Demand an original bottle properly labeled, sealed, and cartoned. Do not accept an opened package from anyone, or a fragment of anything we make. After opening the bottle, replace the broken cork with a new one.

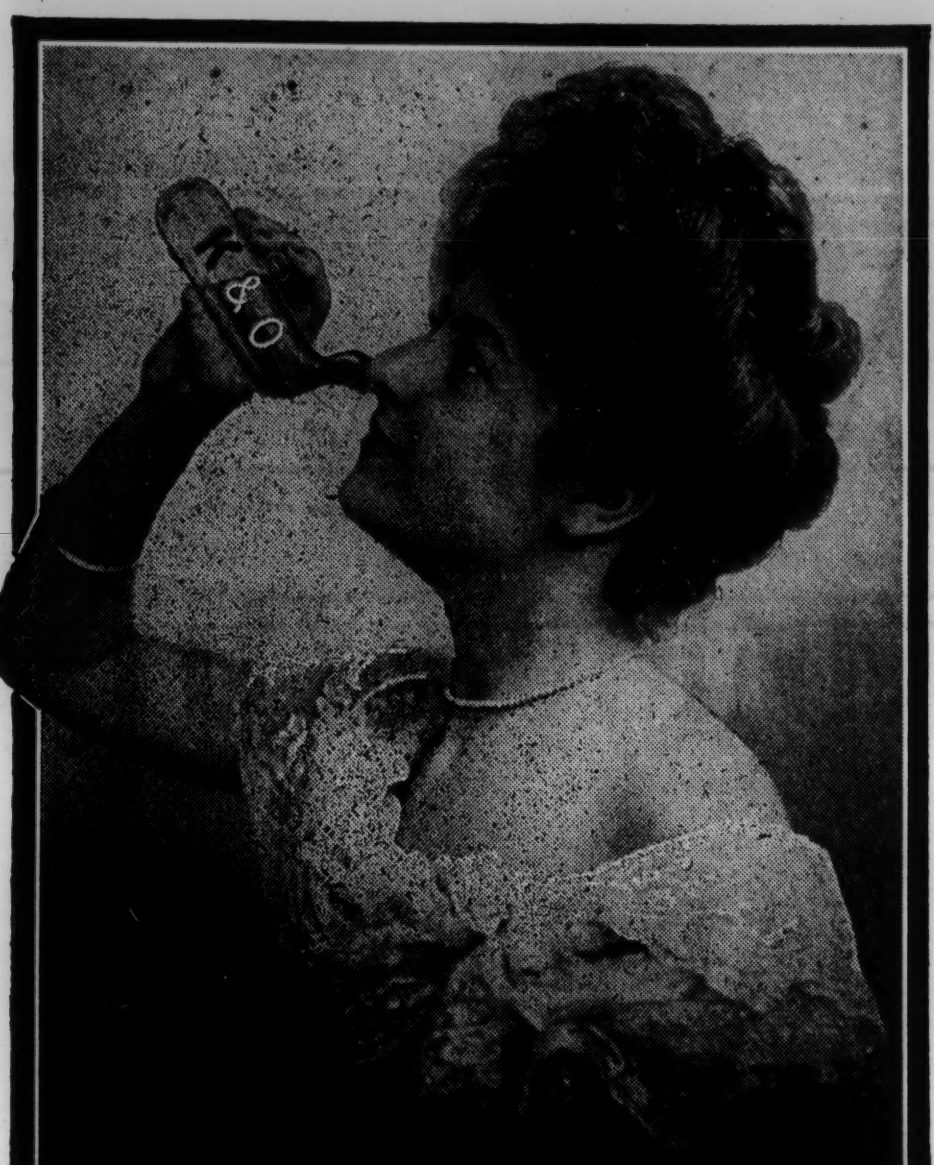
Observe that the original bottle, the wrapper, and the box, is, each of them, labeled as the law demands.

Keep the medicine in the *original container* and after use cork the bottle well.

So far as we know, every preparation bearing our label, in every jobber's stock in America, complies in substance and label with the National Law.

NOT ONE "STICKER" IN ALL AMERICA.

LLOYD BROTHERS, Cincinnati, Ohio.



K&O DOUCHE FOR THE APPLICATION OF GLYCO-THYMOLINE TO THE NASAL CAVITIES

GLYCO=THYMOLINE

FOR

CATARRHAL CONDITIONS

Nasal, Throat

Intestinal

Stomach, Rectal

and Utero=Vaginal

KRESS & OWEN COMPANY

210 FULTON STREET NEW YORK

Sole Agents for Great Britain, Thos. Christy & Company, 4, 10 and 12 Old Swan Lane London, E. C., England.

CALIFORNIA MEDICAL JOURNAL

Entered at San Francisco Post Office as Second-Class Matter.

Contents:

ORIGINAL AND SELECTED.

THE GOODNESS ISN'T THE GREASE

There are just two things about cod liver oil—goodness and grease. It used to be thought that you couldn't get the goodness without the grease. That's wrong. The goodness isn't the grease. It is no more necessary to swallow the nauseous grease of cod liver oil to get the valuable principles, than it is to eat the shell of an egg to get the meat. Right there you have the whole secret of the incalculable value of

In extracting the valuable properties from the grease, nothing is lost in the process; you get all that cod liver oil is famed for, joined with the hypophosphites of lime and soda in a pleasant cordial, without a trace of the dreaded taste. No grease—no fishy odor.

PRESCRIBE CORD. EXT. OL. MORRHUAE COMP. (HAGEE)

and judge of the merits by results. ***Put up in 16-oz. bottles only.***

Katharmon Chemical Co. ST. LOUIS. MO.

NO SUBSTITUTE
HAS YET BEEN FOUND FOR
ACCURACY
FAITHFULNESS
HONESTY PURITY
NOR FOR
ANTIKAMNIA TABLETS

"Antikamnia & Codeine Tablets" in Grippal Conditions

CHIONIA

The Hepatic Stimulant

Prepared from Chionanthus Virginica Expressly for Physicians' Prescriptions

Chionia is a gentle but certain stimulant to the hepatic functions and overcomes suppressed biliary secretions. It is particularly indicated in the treatment of Biliousness, Jaundice, Constipation and all conditions caused by hepatic torpor.

DOSE—One to two teaspoonfuls three times a day. Put up in 1-2 pound bottles only

Free samples to Physicians upon request

Peacock Chemical Co., St. Louis, Mo.
Pharmaceutical Chemists.

PEACOCK'S BROMIDES

THE BEST FORM OF BROMIDES

Each fluid drachm contains 15 grains of the neutral and pure bromides of Potassium, Sodium, Ammonium, Calcium and Lithium.

In Epilepsy and all cases demanding continued bromide treatment, its purity, uniformity and definite therapeutic action, insures the maximum bromide results with the minimum danger of bromism or nausea.

DOSE—One to three teaspoonfuls according to the amount of Bromides desired. Put up in 1-2 pound bottles only. Free samples to the profession upon request

Peacock Chemical Co., St. Louis, Mo.
Pharmaceutical Chemists.

SENG

A Digestive Secernent

A preparation of Panax (Ginseng) which is being successfully employed to stimulate the secretory glands of the alimentary canal. Indicated in Indigestion, Malnutrition, and all conditions arising from a lack of digestive fluids.

DOSE—One or two teaspoonfuls three or more times a day

PUT UP IN 10 OZ. BOTTLES ONLY

Free samples to Physicians upon request

Sultan Drug Co., St. Louis, Mo.
Pharmaceutical Chemists

CACTINA PILLETS

A Cardiac Tonic Stimulant

From Cereus Grandiflora (Mexicana)

Each Pillet containing One One-Hundredth of a grain of Cactina

Indicated in functional cardiac troubles, such as tachycardia, palpitation, feebleness; and to sustain the heart in chronic and febrile diseases. It is not cumulative in its action.

DOSE—One to three Pillets three or four times a day. Put up in bottles of 100 pillets

Free samples to Physicians upon request

Sultan Drug Co., St. Louis, Mo.
Pharmaceutical Chemists

The Keystone of the Therapeutic Arch

which goes to form the treatment of the secondary anæmias is iron; the other constituents of the arch comprise such remedies as aid digestion and improve nutrition.

Colden's Liquid Beef Tonic No. 1 not only provides the necessary iron in an assimilable form, but it holds in combination those remedies which the modern physiologic therapeutist has proved to be most effective in arousing the digestive organs and improving nutrition. Hence, the undeniable efficacy of Colden's Liquid Beef Tonic No. 1, in the treatment of the secondary anæmias. Write for sample and literature.

Sold by all druggists.

THE CHARLES N. CRITTENTON CO., Sole Agents,
115-117 Fulton Street, New York

Dr. Deimel Underwear

(LINEN-MESH)

Best for Fall and Winter, both from the standpoint of healthfulness and comfort,

It insures freedom from Colds, keeps the body uniformly warm, and gives tone and vigor to the entire system.

Write for Literature and Full Particulars.

Deimel Linen-Mesh Co., 1107 Van Ness Ave. San Francisco, Cal.

—BRANCHES:—

NEW YORK, WASHINGTON, D. C., BROOKLYN, BALTIMORE, DETROIT, MONTREAL, CAN., LONDON, ENG.

Dr. Deimel Linen-Mesh Supporters, Suspensories, etc., are made and sold exclusively by J. ELLWOOD LEE CO. Conshohocken, Pa.

CALIFORNIA MEDICAL JOURNAL.

VOL. XXVIII. NOVEMBER, 1907. No. 11.

A Few Miscellaneous Notes.

BY JOHN ALBERT BURNETT, AUBURN, ARKANSAS.

A solution of potassium bicarbonate used externally is a good remedy for prickly heat. Dr. H. W. Felter considers it the best remedy for this condition.

Dr. Eli Denny considers serpentaria (virginia snake root) a specific for urticaria, or nettle rash. He puts half an ounce of the bruised root in a quart of cold water and gives a tablespoonful five or six times a day. This has never failed to cure the complaint inside of two weeks, in eighteen years.

Avena in 20 to 40 drop doses of the fluid extract will abort a "cold;" give it in a swallow of warm water every two to four hours.

Recently I was told by reliable authority that an infusion of horsemint would abort a chill no matter what kind of a chill and there would be no fever following it, even if it was malarial chill. The remedy was also said to be specific for "congestion" of the stomach, or what is known by the laity as "congestion." The remedy was advised to be used by infusion the patient drinking it as hot as he can and all of it he can. For further information see my article "Horsemint," Dec., 1906, in Modern Eclectism.

Dr. F. P. Davis considers monobromate of camphor in small doses every hour the best remedy for persistent hiccough. I find that very small doses of morphine is almost specific for this condition, usually two or three very small doses frequently repeated will relieve it.

Take the white of half a dozen hen eggs and mix thoroughly with half a pint of hog's lard and inject a portion

in the rectum is of much value in dysentery.

A solution of potassium permanganate is almost specific for rhus poisoning.

The following is recommended as a substitute for calcium iodized:

R Iodine, gr. iv.
Potassium iodide, gr. xx.
Saccharin, gr. iv.
Aque calcis, q. s. oz. iv.

M. Sig. Dose, 15 to 30 drops in hot water.

Eclectic emetic powder is made as follows:

R Powdered lobelia, dr. vj.
" sanguinaria,
" skunk cabbage, aa dr. iij.
" ipecac, dr. iv.
" capsicum, dr. j.

M. A cloth greased with lard, hen oil or goose oil and sprinkled with this powder and applied over the bronchial tubes and lungs is of much value in bronchial and lung complaints. I prefer a flannel cloth and goose oil.

Dr. Geo. Roberts of Lincoln, Va., says:

" For over thirty-five years I had a large experience in epidemics of diphtheria among the poor, where large families were in one room. A saturated solution of sodium bisulphite, given in teaspoonful doses three times daily proved prophylactic in every case. Where one was sick no matter how virulent the disease, the other members of the household taking the remedy remained well.

Another good thing: Calcidin for croup and grippe. I give away so much, I prepare the following: 15 grains resublimed iodine, 85 grains of lime, triturate in a mortar. Take of this mixture, quinine and acitanilide equal parts, put in No. 3 capsules and you can often cure grippe in one night. Give one to three hours according to necessity. No fever or pneumonia follows.

Of course the alimentary canal must be looked after.

Sodium bisulphite (not bisulphate) is a substitute for calcium sulphide and the above mixture of lime and iodine is a substitute for iodized lime. Dr. Roberts used the dry air slacked lime in making this.

It is claimed that oil of sassafras will rid either animal or human, of fleas. This is worthy of remembering as they will often come in good places.

Bichromate of potash is the best remedy that I have ever used for hoarseness. It is good for croup and many coughs.

The following is useful where an astringent is needed either on the skin or mucous surface:

R Tannic acid, dr. iv.
Phenol, dr. j.
Fl. ext. hydrastis, oz. ij.
Glycerin, q. s. oz. viij.

Sig. Apply locally (see Oklahoma Medical News Journal, July 1907, p. 189).

I am of the opinion that this would be a good injection for gonorrhœa.

Flexible collodion one ounce, salicylic acid twelve grains mixed and used locally will stop an approaching fever blister.

Tar made from common cockle burrs is of value in rheumatism. Take a kettle and fill it full of cockle burrs and press them in tight, then take a sheet of iron and turn the kettle up on it and lift it off the burrs and set a fire on top, then put the kettle back over them and the tar will run out on the sheet of iron which can be collected in a vessel. If desired a hot fire can be built on top of the kettle which will drive the tar out of the burrs.

An ointment made from cockle burrs used locally is of much value in cases of enlargement of the spleen. Boil the burrs in water and then filter and mix lard with it, and then boil until the water is evaporated.

An infusion of cockle burrs is a good antiperiodic; taken freely it will soon cure chills and fever.

Dr. G. W. Harvey of Adin, Calif., has the following to say:

"Cistus canadensis (rock rose).

"This is another wonderful remedy and we are indebted to our homœopathic brethren for it. It is decidedly antiscrofulitic and antiscorbutic. The homœopathic indications for it are, general scrofulous conditions, swollen indurated suppurating glands, caries of the lower jaw, old ulcers of the back, ankels, and shins, inflamed and suppurating eyes, salt rheum of the hands and fingers, they crack and bleed in the winter from washing; old and troublesome catarrhs; eruptions of all kinds; herpes, tetter, shingle-like eruptions on the back, scales, eruption, open bleeding cancer of the lower lip, lupus, exedens, scorbutic gums, chronic inflamed and suppurating mammæ, itching of the ears and eyes, throat, or anus that is not relieved by scratching. They scratch until the parts are raw and bleeding. Diseases of the finger and toe nails in markedly scrofulitic constitutions. It has done wonders for me, curing chronic suppurating otorrhœa in scrofulous children where the lymphatics of the neck were indurated and swollen or suppurating. They seemed like a chain or beads on a rosary extending up and down the neck, and even the arms and trunk in some children. And again in children that have otorrhœa dating from an attack of the measles or scarlet fever cistus is a grand remedy.

"Put five or ten drops of the mother tincture into a two drachm vial, add alcohol sufficient to saturate the disks, shake well and fill with No. 5 blank disks and direct them to take one of these three or four times a day and you will need not bother with antiseptic washes and irrigations, or packings, nor any other auxillary treatment. Just turn them loose, and if they take their medicine and the case is one for cistus they will get well in a few months.

"Eclectics should know this remedy; study it brethren, and report upon it."

An ounce of alum in half a gallon of water injected high up in the bowels with a colon tube will give good results in tympanitis.

Dr. F. H. England of Chicago, considers emetics a substitute for the static machine. He considers them

a hundred or ten hundred times of more value than the static machine. He did not mention the emetic he used, but I am almost sure it is lobelia. This is a very important fact to remember when not in reach of an electric light plant, and this is often the case with most physicians.

Pelvic Abscess; Its Etiology, Pathology and Treatment.

BY W. T. ELAM, M. D., ST. JOSEPH, MO.

By pelvic abscess we mean either localized pus foci in the cellular tissue under the pelvic peritoneum in and around the uterus, between the layers of the broad ligaments, or collections of pus which have formed in the tubes, ovaries or elesewhere, and have been walled off above the peritoneum in the cul-de-sacs formed by this membrane as it sweeps from the anterior abdominal wall over the pelvic organs.

These abscesses, accordingly as they originate above or below the pelvic peritoneum, are, in their beginning, essentially different processes, due, in most instances, to distinctly different causes acting on, or in, markedly different tissues. In their course, on account of this admixture of causes and different in character and location of tissue, we frequently have a combined pathology to which we are no doubt indebted for the seeming lack of unanimity as regards the surgical measures necessary to bring about relief.

During the past three decades, especially, the female pelvic organs have been the common property of the general and gynecologic surgeon —the one aggressive and a remover of things, the other, at least should have been, though it was not always so, a conservator of the organs under whose banner he has evolved. Excesses have been the history of the former, as a class, while conservatism has been the rule with the latter.

Brief reference to the etiology seems warranted, thus enabling us many times when possessed with the knowledge of the character of the infective agent to picture in our mind's eye the pathology and probable end results attending upon, as well as the particular kind of surgical procedure necessary. Taking all forms of pus collections, acute and chronic, including those of the tubes and ovaries, free, or walled off by adhesions, we find therein, the following pathogenic organisms: gonococcus strepto and staphylococcus pyogenes, and bacillus coli communis. Other germs especially the tubercle bacillus, and as well numerous saprophitic organisms are frequently found. Their implantation and propagation upon and into the tissues is brought about, or favored, by gonorrheal infection, abortion, labor at full term, manual or instrumental examination, and surgical in-

terference. Andrews (Statistical Notes on Causes of Salpingitis; A. J. O. and D. W. and C., Vol. XLIX, No. 314, Feb., 1904, p. 181) found germs occurring in the following order of frequency; number of cases examined 684 compiled from the work of 28 different authors—cases presumed to include acute, subacute and chronic pyosalpinx:

		℘ cent.
Gonococcus	155	22.5
Staphlo- and streptococcus	86	12.0
Bacillus coli communis	18	2.5
Pneumococcus	14	2.0
Saprophites only	45	6.0
Sterile pus		55.0

Robb and Smith (Am. J. O. and D. W. and C., Vol. L., No. 320, August, 1904, p. 190, "The Streptococcus in Gynecology") found the streptococcus in 16 out of 137 cases or about 8.5%. Other investigators substantiate these claims.

Abscesses developing in the uterine walls, in the cellular tissue around this organ, or between the layers of broad ligaments, are almost always due to strepto- or staphylococcic infection, or both, usually following delivery, at, or near, full term. The bruising and tearing of the tissues of the uterus and pelvic floor furnish the necessary rent and soil for germ implantation and development. These extra-peritoneal pus formations may burrow along the normal lines of cleavage upward and backward behind the peritoneum along the psoas muscle, or upward and forward to the anterior abdominal wall along and above the outer two-thirds of Poupart's ligament, or rupture into the peritoneal cul-de-sacs (adhesions having previously been established), and occasionally into the bowel or bladder. Their most frequent disposition however, if allowed to pursue an unmolested course, is to point or rupture into the posterior, anterior, or lateral fornices. They are most frequently an accompaniment or sequel of an acute cellulitis which is ushered in within from 24 hours to ten days after infection with a chill, and, if uncomplicated by peritoneal involvement, a rapid, full, bounding pulse, dull throbbing pain, dry hot skin, and a temperature ranging from 100 to 103 or 104° F. In fact the picture is one of a typical sthenic inflammation. Physical examination reveals an enlarged edematous, hot, tender uterus, or a painful, hot swelling, or doughy mass, in one or more of the fornices. If peritonitis coexists or supervenes, the symptoms will then reflect the character of the tissue bearing the brunt of the infectious process.

Treatment.—It perhaps will best preserve the connection between cause, pathology and treatment, to take up the treatment of extra-peritoneal or cellulitic abscess at this point. These abscesses are essentially acute, as we have in connection with the local infection acute inflammatory exudates, together with more or less profound systemic involvement due to the absorption of toxines, or the activity of the germs, or both, in the blood. In either instance, the indication is, to my mind, clear. The general surgical rule, "when pus is present, evacuate it," applies most pertinently here, even

though a septicemia or septico-pyemia coexists. This indication is plainly for the evacuation of the pus, and it should be done extra-peritoneally through an incision into the posterior, anterior, or lateral fornices, or along the outer upper border of Poupart's ligament, the location being determined by the point of fluctuation. In no instance should the patient be subjected to an abdominal celiotomy for the purpose of drainage or removal of pus in the cellular tissue. When multiple abscesses occur, all of the compartments involved should be freely opened, and the pus pockets carefully searched for by finger dissection, evacuated, cauterized, and drainage instituted by means of ten or twenty per cent. iodoform gauze.

When multiple abscesses form in the uterine wall the incision should extend entirely around the cervix and into the anterior and posterior peritoneal cul-de-sacs. After packing the incised areas with iodoform gauze, the patient should be returned to her bed and, if temperature falls and improvement occurs, she should be returned to the table in from seven to ten days for a complete hysterectomy, either per vaginum or via the abdominal route as best meets the views and experience of the individual operator. The following selected case illustrates this point:

Mrs. S., residing near B., Mo., æt. 35 years; housewife; mother of five children, eldest twelve years, youngest three years. Menstrual history up to the time of marriage, negative. Had a rather severe labor with child-bed fever after first child, and post-partum hemorrhage after second child, since which time (other labors being normal) had been fairly well until a few weeks prior to my being called in consultation by Dr. H., on June 6, 1904. History of present illness: Had been suffering with leucorrhea, and had consulted a physician in a near by town who examined and instituted treatment, consisting of topical applications and the use of tampons, same being administered once or twice weekly. Last examination and treatment June 4, 1904. That night about midnight, Dr. H. was called. Found patient with high temperature, 104, following a chill, pulse rapid and soft, 130, extreme tenderness with lancinating pains in hypogastric region, abdominal distention and rigidity attended by marked prostration. These symptoms had somewhat subsided under the treatment instituted when I saw her on the 6th. Bimanual examination revealed tenderness with some rigidity over lower abdomen, a bilateral laceration of cervix, a large, tender uterus, with hot, painful, swollen, tense fornices. At our second visit, the intoxication and peritoneal irritation had largely disappeared and the symptoms had become those characteristic of an acute cellulitic infection, i. e., full bounding pulse, 110, temperature 101. Bimanual examination revealed an enlarged uterus, sensitive masses in the posterior and right lateral fornices. At our third visit, June 11th, operation was suggested, but as patient seemed to be holding her own, it was deferred. On July 2d

we were again called and operation agreed to. Patient was placed under chloroform and the posterior and right lateral fornices opened. Upon using the finger multiple pus foci were evacuated, the finger finally finding its way into a rather extensive abscess situated high up between the lamina of the right broad ligament, and another in the right anterior aspect of uterine wall. Further work was contraindicated by patient's condition. Improvement followed sufficient to allow the patient to be brought to St. Joseph's Hospital, where on July 20th, I set about to make a hysterectomy by the two stage method. Incision was made entirely around the cervix and with the finger dissection was carried out between the layers of the broard ligaments evacuating multiple small pus deposits, after which entrance was gained to the peritoneal cavity by opening the anterior and posterior cul-de-sacs. Gauze packing controlled hemorrhage and provided for drainage. Patient reacted nicely, and was returned to operating table July 30th, at which time the uterus, tubes and right ovary, which was found to be transformed into an abscess, were removed by the abdominal route. Uterus, three or four times its normal size, was found to contain numerous small abscesses. The patient made an uneventful recovery, leaving the hospital at the end of five weeks. Since her return home her health has been excellent.

Intra-peritoneal pus accumulations are usually due to gonococcic, strepto-staphylococcic, or bacilli colic infection, following a gonorrhea, or abortion. These abscesses may consist of pus distended tubes or ovaries, enveloped or surrounded by adhesions, of pus accumulations walled off in the cul-de-sacs following rupture of these organs, extra-peritoneal abscesses, or collections from a purulent peritonitis. In either instance the adhesions may include the rectum, uterus bowel, omentum, broad ligaments and bladder in the pathology forming the abscess walls. If the pathology be due to simple gonorrheal infection it usually does not extend beyond the tube whose abdominal and uterine ostei are sealed, constituting true pyosalpinx, free of adhesions. As they are not strictly pelvic abscesses, unless surrounded by adhesions, they will not be given further consideration. When there is a strepto- or staphylococcic infection occurring either separately, or combined, following an abortion, the burden of resistance is largely thrown upon the peritoneum. Plastic lymph is thrown out and adhesive barriers formed as if directed and executed by a master hand. In all instances, there is an acute adhesive pelvic peritonitis accompanying, or preceding the abscess formation, which develops ordinarily within from one to seven days after the implantation of the germs. Its onset is characterized by chilly sensations (rarely a distinct rigor), hyperpyrexia 102 to 105 or 106 F., rapid, soft or feeble pulse, 110 to 140, attended by great prostration. There is tenderness and pain over the hypogastric region with rigidity and distention of the lower ab-

domen. Bimanual examination fails many times to admit the outlines of the uterus being plainly defined on account of pain, adhesions, and exudates, although its fixation can be determined. There is noted a fluctuating mass, or bulging, in the anterior, posterior, or lateral fornices. These features together with the anxious expression and flexed limbs point plainly to the character of the trouble and indicate clearly the treatment.

When the patient was weathered through, as they sometimes do, the acute attack, we then find a subacute or chronic abscess containing attenuated or sterile pus, attended by little or no systemic reaction, aside from a distinct leucocytosis, and a condition of chronic invalidism. This condition, as does the acute form, clearly calls for the same definite surgical procedure, although, unlike the acute form, it admits of a choice of routes and an extension of work to the point of removal of hopelessly diseased structures or organs. The primary indication here, as in the first instance, is to evacuate pus and establish drainage. This should be done, as in acute cases, per vaginum instead of transperitoneally through an abdominal incision. It is accomplished by catching the anterior or posterior lip of the cervix with taneucla or vulcellum forceps, drawing it forward and after making a nick in the posterior or anterior fornix, as the bulging indicates, with a long pair of curved scissors, the operator then plunges the instrument into the abscess, remembering the axis of the pelvis. The blades are then spread apart, and the instrument withdrawn, thus enlarging the vaginal incision. Perhaps a better plan for the novice is to use the finger, or pair of uterine dilators, after the initial incision has been made. The abscess cavity is then carefully swabbed out and lightly packed with ten, or as some advise, twenty per cent. iodoform gauze. It not infrequently happens, that dilatation and light curettage, using the finger or blunt curette is demanded, both in this form and in the cellulitic abscess, at the same time, especially if the uterus has been recently emptied by abortion or labor at term. The patient should then be returned to her bed, and if an anesthetic has been used proper measures instituted to favor reaction. If the pathology is so great that organs must be sacrificed, they should be removed at a later date when the parts and patient's system is comparatively free from infectious agents. In many cases a symptomatic cure will result, and it is not out of the range of possibility that some will never be forced to submit to the sacrifice of important organs. The case here cited, bears strongly upon this point:

Mrs. R., housewife, age 30, St. Joseph, Mo.; mother of three children, eldest seven years, youngest two years; consulted me on September 10, 1899. Menstrual and child bed history, negative. Examination revealed a gonorrheal urethritis. After two weeks' treatment, gonococci disappeared and discharge ceased. Patient was kept under observation until October 15th, at which time on account of

considerable complaint, a bimanual examination was made and a right-sided pyosalpinx found. Patient was advised that an operation was indicated, to which she agreed to submit as soon as circumstances would permit. She disappeared from sight, and I heard nothing from her until late in the afternoon of December 31st of the same year, when I was notified that she was going to the hospital to be operated the next morning. I telephoned the necessary directions for her preparation to the hospital, and on the morning of January 1, 1900, I opened the abdomen without further examination, and found the omentum plastered down to the brim of the pelvis laterally, including the entire anterior surface of the broad ligaments and uterus with every evidence of a receding pelvic peritonitis. Examination revealed that Douglas' pouch and the right side of the pelvis was filled with a fluctuating mass. The patient was placed in the dorso-sacral position and a uterine curettage performed, removing a considerable amount of necrotic tissue, after which an incision was made in the posterior fornix, thus evacuating the pus, an iodoform gauze drain placed in position, the abdominal wound closed, and the patient returned to her bed. She made an uneventful recovery, and her subsequent condition was so satisfactory that further operative measures were refused. I discovered later that the patient had aborted some two or three weeks prior to operation, thus accounting for the acute peritoneal infection. A few months thereafter she became pregnant and was delivered at term of a healthy fetus. On April 29, 1903, I operated on her for appendiceal abscess involving the right ovary and to my surprise, I found no adhesions except a strip of omentum about the width of three fingers attached to, or forming a part of the abscess wall. The other tube, ovary and uterus appeared normal, the omental adhesions having disappeared, except as stated. This patient since that time has given birth to her fifth child.

In the chronic forms of peritoneal abscess many surgeons prefer the abdominal route, as it affords a better chance to view and accurately measure the pathology, and, at the same time, enables them to remove, without great additional risk or shock, those organs and structures which are a menace to the patient's existence. By carefully padding and walling off the viscera and adjacent peritoneal surfaces, cauterizing stumps, and whipping over raw surfaces, the operator conserves to the highest degree his patient's chances of permanent recovery.

Finally the following points seem to merit emphasizing:

1. Pelvic abscess is not always due to the same cause, nor is it always found in the same location, neither is it a distinct pathological entity.

2. All abscesses of the cellular tissue should be thoroughly incised and drained extra-peritoneally, the location of the incision being determined by the point of fluctuation.

3. When multiple abscess of the uterus exist a hysterectomy should

be done preferably by the two stage method, as shown in case 1.

4. All pus accumulations walled off in the cul-de-sacs by adhesions should be drained by thorough vaginal incision.

5. Vaginal drainage is unquestionably the route of choice for drainage in acute walled off tubal and ovarian abscesses, but in no instance should the operator attempt to extend the operation to include the removal of these organs, as adhesions might be broken through and virulent infectious matter forced into the general peritoneal cavity, thus producing a general peritonitis.

6. In case salpingectomy or oophorectomy seems to be demanded, it is better to do this work as a secondary measure, admitting of a sufficient interval between the steps to allow the patient to thoroughly react, and the infectious process to disappear, at which time it can best be done by the abdominal route

7. Experience has proven, as shown in case 2, that sometimes important organs, even though embarrassed by adhesions, or to some extent diseased, may react and partially or wholly resume their function. It is the province of honest surgery, to conserve all organs and structures to the end that the reputation of surgery may be sustained.

8. In chronic pyosalpinx, or abscess of the ovaries, where adhesions exist, the abscess together with the diseased organs may be removed via the abdominal route, especially if the operator is a careful, conscietious observer of technique. The fact, however, that no definite period of time has been established which assures the sterility of the contents of these abscesses, makes this work distinctly hazardous.—*New England Medical Monthly*.

A Study on the Action of Drugs.

BY F. J. PETERSEN, M. D.

This is a continuation of the subject of Comparative Study of the Action of Drugs as outlined in the March issue of this Journal, with the difference that the scales and comparative tables are omitted. The outlines and key notes are only given and all those who have seen the March issue will fully understand the comparative study of the drugs below.

LOBELIA INFLATA.—The full physiological effects of this drug manifest themselves by languor, vertigo, nausea, dyspnœa with sensation of constriction in the chest, increased flow of saliva and gastric mucous secretion, vomitng. Great depression and prostration with an oppressed feeling; fear, or in other words anguish. Great muscular prostration and relaxation, clammy cold sweats, pallor, circulation becomes feeble, pulse weak and in severe cases complete collapse.

In its secondary form, or mild phys-

iological action it is indicated in cases where relaxation is needed, fevers where relaxation and expectoration is desirable. In spasms of most any form, especially if of sthenic nature, it is a useful remedy. Asthma, or angina pectoris as an emetic, which in reality is blending into the full physiological action. It may be given where there is an accumulation in the stomach, or spasms as a result of this, where tongue is broad and flabby, and especially if heavily coated on back. Never forget lobelia in spasms, especially if of sthenic nature, on account of its relaxing power.

PRIMARY ACTION.—In nausea, vomiting, and dyspnœa with a compressed feeling in chest, where there is languor, relaxation of muscles, vertigo, oppressed feeling, anguish, great prostration, profuse perspiration, cold sweats, pallor. Profuse salivation, nausea ; still appetite not impaired.

Understanding the action and why it acts as it does in the different forms, will readily suggest to the physician its use in the physiological, secondary and primary form.

JABORANDI.—Full physiological doses of jaborandi stimulate the secretion of the whole glandular system, causing profuse perspiration, marked flow of saliva, nausea, vomiting, contracted pupils, dimness of vision, sighing respiration, palpitation and collapse, and in some cases edema of the lungs.

Indications for its use in the secondary form:

To relax in the sthenic conditions and cause free diaphoresis. In conditions where skin is dry and mouth dry.

Indications for its use in the primary form:

Abnormal sweats, heat and sweating; pupils contracted, dimness of vision, white spots and blurring before the eyes. Salivation, if not of mercurial origin. Urine scanty with pressure and urging. Pulse irregular, cyanosis, collapse, edema of the lungs, foamy expectoration, slow, sighing respiration.

If we have properly diagnosed our case it is easy to see in what conditions jaborandi can be used in the primary or secondary form.

If its action is carried too far in the secondary form, where it blends into the full physiological action, a remedy suggests itself to counteract the excessive perspiration and debility and that is belladonna in the secondary form.

Studying the action of drugs on these lines, makes it easy, interesting and a pleasure. As the reader will see the leading basic indications are only given of lobelia and jaborandi ; but they are sufficient to show their general use; minor indications can be looked up at leisure.

The main importance in the study of drugs is to understand their action in all forms. If the diagnosis is correct the remedies will suggest themselves. Now as to doses:

Taking for instance jaborandi, a remedy which, as an antidote in strychnine poisoning, has no equal. In severe cases I have given it in ten to fifteen drop doses every fifteen

to twenty minutes for hours, gradually decreasing doses and giving at longer intervals as symptoms subside. In general such doses would be dangerous; but in these cases the tension to overcome is so strong that it requires very large doses to establish equilibrium. This will serve as an illustration that judgment is required as to size of dose and that conditions must be understood.

In other conditions we find at times that where the relaxing effect cannot be produced by jaborandi in the secondary form secretion of urine is increased. In conditions where the drug fails to produce perspiration nor increase the flow of urine we may expect pericardial effusion or edema of the lungs.

In conclusion I wish to say that the reader will understand how important it is to be a good diagnostician, to be well versed in pathology, the physiological, secondary and primary action of drugs, in order to be most successful in the practice of medicine.

Surgical Suggestions.

A condition of euphoria is often seen in serious cases of peritonitis and should not be taken as a sign of beginning recovery.

In many cases of shock, a venous infusion will more often save life than dallying with stimulants which merely in the end serve to tire out the heart.

An easy way to straighten out a probe that has been much bent and twisted is to roll it under the foot on an even floor.

A neuralgic pain in the region of the ear, should suggest a careful examination of the teeth for a possible caries or alveolar abscess.

Placing the skin sutures in the scalp obliqnely will often control hemorrhage from a wound as well as will ligating separate vessels.

One should inquire carefully for the history of the application of carbolic acid to a wound, especially of the finger or toe, when a gangrene with a distinct line of demarkation has developed.

If a patient presents himself with a painless cellulitis of the finger or hand, it is necessary to make a careful examination for the possible presence of syringomyelia.

An exquisitely tender swelling situated just aboye the sterno-clavicular articulation may be due to the perforation of the esophagus by a foreign body. If there is evidence of acute laryngitis with edema of the arytenoid cartilages, the cause may be a perichondritis of one of the tracheal rings or the cricoid cartilage.

Sudden, marked rise of temperature a few days after an operation for appendicitis, especially if attended by chills, may mean thrombosis of the portal vein or multiple abscesses of the liver.

A gradually increasing anemia in an elderly person, without any other symptoms, is highly suggestive of a latent carcinoma, often in the intestine.—*American Journal of Surgery.*

Materia Medica and Clinical Therapeutics.

BY F. J. PETERSEN, M. D.

Printed on good paper and substantially bound in cloth, 400 pages. Price $3.00 prepaid.

The author considers drugs in their entirety; that is for their physiological, secondary and primary effect. This together with useful formulas and other useful information, makes it a work that will be appreciated by all liberal practitioners. It will be found to be a friend in time of need.

The following are selected from the many commendations given this work on Materia Medica and Clinical Therapeutics:

The work is a beautiful portrayal of Specific Medication and will be found of great service to the young student who is desirous of learning this great system of therapeutics as well as the old physician who likes a good thing and wants to know more about it. Modern Eclecticism.

After once becoming familiar with it, it will be found a good friend in time of need. The Los Angeles Journal of Eclectic Medicine.

This book is unique in that it presents so many totally distinct sections and considers both Eclectic and Homoeopathic therapeutics, though separately treated. Taken altogether it is a small cyclopedia of useful therapeutic memoranda and deserves ot be on the book-shelve of both Eclectic and Homoeopathic practitioners. Eclectic Medical Gleaner.

The book is both original and practical, hence must prove useful.
The Pacific Coast Journal of Homoecpathy.

The book shows a great amount of research and will serve both Eclectic and Homoeopathic physicians equally well. Eclectic Medical Journal.

His style and diction is quite original and we feel sure it will pay you to buy the book. The Eclectic Review.

The specific indications of all the drugs are certainly presented very thoroughly and practically. This is written for the Eclectic school and will be found a valuable acquisition to our literature.
The Chicago Medical Times.

It deals not only with Eclectic Materia Medica, but with the old school and Homoeopathic remedies as well. California Medical Journal.

The most knowledge in a limited space is demanded everywhere and it will be found that these are the only kind of books that will be read. I congratulate you and bespeak for your book a worthy support.
Albert J. Atkins, M. D.

It is most suggestive and helpful when one is wondering what next to do. I would not part with mine for three times its cost.
James Beard, M. D.

The work is a credit to the school you represent. I can commend the work to every physician whatever his doctrine as to drug action or political divisions. Herbert T. Webster, M. D.

While the work is broad in its scope, it does not neglect the essentials but has kept the size in convenient bounds by ommitting much useless data which so often encumbers the text books. Wm. C. Bailey, M. D.

If you want the latest, get Dr. Petersen's Materia Medica and Clinical Therapeutics. Address,

The California Medical Journal

970 Dolores Street San Francisco, Cal.

HEADACHE

That form of **headache** known as **Migraine** is conceded by most physicians to be due to **autotoxemia** and may be **treated** in a **rational** and **effective manner** by the administration of a single daily dose of

AKARALGIA

(Granular Effervescent Sodium Salicylate Compound)

Just one dose of this effervescent salt each morning, before eating, assures your patient **freedom** from the **suffering** which otherwise may, at any time, be expected by the **chronic migraine** victim.

No other plan of treatment will do this.

AKARALGIA

contains no habit-forming drugs, and if given for a sufficient length of time, a cure may be anticipated in a reasonable percentage of cases treated.

Send for a reprint of Dr. Rachford's article—it contains complete formula.

The Wm. S. Merrell Chemical Co.

New York **CINCINNATI** **San Francisco**

CALIFORNIA MEDICAL JOURNAL

D. Maclean, M. D., Editor.

F. C. Maclean, M. D., Mgr.

Published Monthly, $1.50 per year.

964 Dolores St., San Francisco, Cal.

Editorial.

THE LABORER IS WORTHY OF HIS HIRE.

If the laborer does faithful honest work he should receive just remuneration for his services. The laborer on the street, and the employes of every department in the service of the city receive fair pay, with the exception of the physicians. The present mayor, Dr. Taylor, has placed the services of the physicians on a par with the street sweepers—two dollars and a half a day. We do not know whether the good doctor and his good Board of Health value services by their own worth; if so, they must rate their services away below the average.

The writer could never see why physicians should give their valuable time gratis to the public.

The Board of Health should be well paid. The visiting physicians to the City and County Hospital should not be compelled to work for nothing. There is no other class of men who would do so. The merchant, the plumber or the painter will not donate so many hours a week to the public service, why should the physician?

The unkindest act of the present administration lies in closing one of the emergency hospitals, and reducing the salaries of the surgeons at the others. The central emergency hospital should have one of the best and most skilful surgeons in attendance, and paid according to his worth. He should have competent assistants, who should receive more than a street sweeper.

CLEAN MONEY.

A Cressy Morrison is vigorously promoting a crusade against dirty money, dirty old bills and dirty coins. The dimes have been found to average 40 living bacteria each; moderately clean bills 2250 each, and dirty bills 73,000 each. It can be readily seen how infection can be carried by coins and bills.

The remedy is to provide for the redemption of bills, by the government, and the issuance of clean paper. The sterilizing and polishing of coins either by banks or government. If everybody demanded clean money, it would soon be forthcoming.

The California Eclectic Medical College has opened with a full corps of Professors and a goodly sized class of students.

Dr. Keegan, of San Diego, made a pleasant call. He has gone East to take a post graduate course. Will again locate in San Diago on his return.

Dr. B. N. Childs has gone to Adin, Cal.

Dr. Frederick Wallace Abbott, of Taunton, Mass., recently declined an

urgent invitation to the Vice Presidency of Tolemac University, Washington, D. C.

Two Cases of Pulmonary Regurgitation.

Detailed clinical histories of the cases with post-mortem findings are given by D. B. Lees and V. Z. Cope. Case one was one of infective endocarditis affecting only the pulmonary valves and occurring in a single woman of 24 years. Case two was of a man of 39 years with an aortic aneurism which ruptured into the pulmonary artery and caused regurgitation. The authors make an analytical study of 99 recorded cases. In fourteen of these the incompetency was due to an aortic anurism rupturing into the pulmonary artery and causing the valves to adhere to the walls of the artery. The leision is said not to be very uncommon. The diagnosis was made difficult by the accompanying aortic regurgitation. The presence of an aneurism was regarded as certain, but the extraordinary nature of the sounds, both as to intensity and continuity, made those who saw the case confident that there was something in addition to aortic incompetence and this lesion. The suggestion was discussed as to whether the aneurism had broken through into the pulmonary artery, but no certain conclusion was arrived at on this point. During life the pulmonary incompetence was not differentiated from the accompanying aortic regurgitation. In this case also there was a distinct history of a sudden muscular overexertion. The patient was a heavy smoker, but the authors are not prepared to say how much of a factor this habit was in this special case. They note that infective endocarditis of the pulmonary valve is most frequently of gonorrheal origin, though in their own case (case one) this fact could not be demonstrated. —*New England Medical Monthly*.

INFLUENCE OF HYDROGEN PEROXIDE UPON UTERINE HEMORRHAGES.

The writer records favorable results with the injection of hydrogen peroxide into the uterus in two cases of hemorrhage. He claims to have checked by means of but two injections, hemorrhages which could not be controlled in any other way. This therapy was first recommended in 1895 by Petit, who used an applicator, while Spirt employs the Braun syringe. —*New England Medical Monthly*.

ELONGATION OF THE UVULA.

As a gargle in sore throat or elongation of the uvula, Kennedy's Dark Pinus Canadensis has very general endorsement, the usual proportion being teaspoonful to glass of water.

THE OLDER MASTERS OF VENEREOLOGY were very particular to keep their gonorrheal patients on demulcent drinks and a low diet, and accomplished much good by this course. The soothing demulcent effect of Sanmetto renders it an ideal remedy in gonorrhea.

THE VALUE OF CODEINE.

The *Cleveland Medical Journal* quoting from the *Denver Medical Times*, concerning codeine, states that, according to Butler, it is less depressing and more stimulating than morphine, does not constipate, cause headache or nausea, and rarely leads to the formation of a habit. Codeine seems to exert a special, selective, sedative power over the pneumogastric nerve, hence its value in irritative laryngeal, pharyngeal and phthisical coughs with scanty secretion. Like morphine, it has proved of value in checking the progress of saccharine diabetes, and it has been used for long periods, without the formation of the drug habit, inasmuch as when glycosuria was brought to a termination by dietary and other measures, the cessation of the use of codeine was not followed by any special distress. The effects of codeine on the alimentary canal are remarkable, in that it assuages pain as well or better than morphine and nevertheless does not check the secretions or peristalsis notably, unless the latter is excessive, as in dysentery." In view of these facts it would seem that Antikamnia & Codeine Tablets are a remedy which should find a wide field. Prof. Schwarze (Therapeutische Monatshefte) in writing upon the treatment of the different forms of dysmenorrhœa, and the different forms of congenital deformity of the uterus, states that the coal-tar analgesics are of much use, as well as the preparations of iron and sodium salicylate. In many cases it is necessary to administer codeine in small doses, and the tablets of "Antikamnia & Codeine" would seem to have been especially prepared in their proportions, for just these indications.

SLEEPLESSNESS.

Nothing is more destructive to physical health, or more conducive to mental distress, than insomnia. Unless the patient is permitted to sleep, the nervous system becomes unstrung and uncontrollable, and medicines that are ordinarily efficacious lose their value. The first requisite in such cases is a remedy that will induce calmness and refreshing rest. Daniel's Conct. Tinct. Passiflora Incarnata fulfills this requirement, and, besides giving natural slumber, causes a relaxation of the nervous system aud a building up of all the body tissues.

Daniel's Conct. Tinct. Passiflora Incarnata, is a Nerve sedative and Tonic. Its action is directed against the Ganglia, so that it may be used with great advantage in all nervous diseases. It relieves the Tension to which the Nerves are subjected, gives relaxation to the patient, and places him in a condition sound and natural. Its tonic properties are most beneficial, being an invaluable aid in convalescence.

HOME-MADE BUTTERMILK.

It is now within the power of every household to have an abundance of that refreshing and healthful summer (also winter) drink—buttermilk. To the present time no one knew of any source of buttermilk except from the butter-maker; but now-a-days the butter-maker does his work so well that the buttermilk is entirely deprived of the delicious little grains of fat which add so much to its food qualities as well as to taste. True buttermilk, made direct from fresh rich milk, within a few hours, of the finest flavor and taste, nutritious and more excellent than the article originally known, can now be prepared in any kitchen. This is done by taking a quart of fresh, rich milk, adding a pinch of salt and about a half-pint of hot water to raise the temperature to body heat, and lastly adding a tablet which contains a pure culture of lactic acid bacteria. Place all in a pitcher, cover with a napkin, and let stand for twenty to twenty-four hours at the ordinary temperature, and there is your perfect buttermilk. The tablets are made by Parke, Davis & Co., the pharmaceutical and chemical manufacturers of Detroit, Michigan, and are called "Lactone" or buttermilk tablets.

On the farm, in the process of buttermaking the cream is allowed to sour spontaneously and is then churned. The souring is the lactic acid fermentation caused by lactic acid bacteria or ferments. The difference between the new and old process is one of method and not result. In the old, the lactic fermentation is waited for and expected to occur spontaneously, with disappointment sometimes. In the new, the ferment in pure culture is directly planted in the milk, and the desired fermentation is secured without fail. In Bible days, spontaneous fermentation of dough was depended upon to leaven or lighten bread, and failure frequently attended the process, the dough putrefying instead of fermenting, and was then lost. Finally, man learned to add yeast to the dough and not to depend upon spontaneous processes, with the result of always securing the right fermentation and making a better and more nutritious bread. This new buttermilk process is a like improvement.—*Monthly Bulletin Indiana State Board of Health*, June, 1907.

For nervousness, sleeplessness and sexual excitement, characterized by erections or even chordee, various authorities vary in their recommendations. Ringer recommends the use of aconite and camphor. Bartholow and Phillips, both advise the administration of lupulin. The value of Hyoscyamus has been appreciated by many medical men for a long time, and is quite valuable. Bromidia is to be highly recommended, since it consists of chloral, bromide, hyoscyamus and cannabis indica, and acts as a somnifacient, spinal sedative and hypnotic. The dose is a drachm to two drachms an hour before bed time. —*American Journal Dermatology*.

TREATMENT OF UTEROVAGINAL CATARRH,

BY C. E. BRANDENBURG, M.D., N. Y. City.

Fifteen months ago Mrs. X. came to me for treatment, giving the following history: Six years previous she had a miscarriage, since which she had been troubled with a profuse leucorrhea of a very foul odor. At her menstrual period she suffered greatly and flowed excessively. On examination the cervix was found to be nearly four times its normal size and so badly eroded as to have every appearance of a cancer and had been mistaken for such by one physician. The uterus was soft and boggy and very much enlarged. She had been to the hospital on two accasions and each time had been curetted, but this seemed only to aggravate the general condition. For over a year I treated her with every means at hand, but to no purpose. I was making preparation for an operation, which would have meant the removal of the uterus, when my attention was drawn to Glyco-Thymoline and I determined to give it a thorough trial before operative measures were to be further indicated. An intrauterine douche of Glyco-Thymoline in 25% hot solution was administered and lamb's wool tampons saturated with Glyco-Thymoline pure were used. She began to improve from the first application. The leucorrhea became less and the odor disappeared entirely. The cervix took on a healthy look. The uterus decreased in size and became firm; in fact she is now nearly well after nine weeks' treatment with Glyco-Thymoline.

"SPINAL CORD COMPLICATIONS OF ANEMIA."

With increased knowledge of the anatomy and physiology of the brain and spinal cord, there is a growing opinion among careful clinical observers that many of the nervous phenomena accompanying general anemia can be directly attributed to resulting changes in the nervous system. The spinal cord complications of pernicious anemia have been recognized for some time, and it is no uncommon thing in these cases to find pronounced degenerative areas throughout the cord. The posterior columns and occasionally the lateral are most often involved, the nerve fibres being chiefly affected, without however, the extreme shrinking usually observed in locomotor ataxia. While there can be no doubt that these conditions depend to a certain extent on the blood changes incident to the anemic process, it is more than probable that the toxins resulting from the attending hemolysis exert direct injury on the nerve cells.

Fortunately the ordinary anemias are not attended by such extreme changes, and the resulting symptoms, with their speedy control under appropriate treatment, point to a functional rather than an organic origin. These symptoms, while extremely variable, usually consist of constant and pronounced backaches, especially in the cervical and dorsal regions, sensitive areas along the spinal column, variations in the spinal reflexes, paresthesias generally, and often times irritability of the anal or vesical

sphincters. Headache is frequently complained of, although the patient is usually able to sleep. The symptoms referable to the sexual function are also extremely variable, especially in the female, and range all the way from absolute frigidity to positive nymphomania.

Frequent reference is made to the heart by these anemic patients, and while their symptoms may be somewhat due to the changes in the blood current, there can be no question that the sympathetic nerves suffer in the general involvement of the nervous system, and may therefore be directly responsible for the arythmia, tachycardia, etc., so often complained of.

The great therapeutic value of Pepto-Mangan (Gude) is well shown by its rapid and pronounced action in these cases of anemia complicated by nervous derangements. With the rise in hemoglobin and the blood count, which immediately follows the administration of Pepto-Mangan (Gude), the backaches and headaches cease, the sensory disturbances disappear, and the patient's nervous system rapidly returns to the normal. The comparative ease with which these cases are restored to health when thus treated, will be exceedingly gratifying to the zealous practitioner. He, more than anyone else, realizes the danger of letting young females thus afflicted drag along indefinitely, for he knows that the psychic influence of long continued sensory disturbance is extremely prone to develop and magnify any hysterical tendencies however latent. Early and efficient treatment is therefore not only desirable but urgently necessary, and Pepto-Mangan (Gude) will never prove disappointing.

A DELIGHTFUL REVELATION

The value of Senna as a laxative is well known to the medical profession, but to the physician accustomed to the ordinary senna preparations, the gentle yet efficient action of the pure laxative principles correctly obtained and scientifically combined with a pleasant aromatic syrup of California figs is a delightful revelation, and in order that the name of the laxative combination may be more fully descriptive of it, we have added to the name Syrup of Figs "and Elixir of Senna," so that its full title now is **"Syrup of Figs and Elixir of Senna."**

It is the same pleasant, gentle laxative, however, which for many years past physicians have entrusted to domestic use because of its non-irritant and non-debilitating character, its wide range of usefulness and its freedom from every objectionable quality. It is well and generally known that the component parts of Syrup of Figs and Elixir of Senna are as follows:

Syrup of California Figs	75 parts
Aromatic Elixir of Senna, manufactured by our original method, known to the California Fig Syrup Co. only .	25 parts

Its production satisfied the demand of the profession for an elegant pharmaceutical laxative of agreeable quality and high standard, and it is, therefore, a scientific accomplishment of value, as our method ensures that perfect purity and uniformity of product required by the careful physician. It is a laxative which physicians may sanction for family use because its constituents are known to the profession and the remedy itself proven to be prompt and reliable in its action acceptable to the taste and never followed by the slightest debilitation.

ITS ETHICAL CHARACTER.

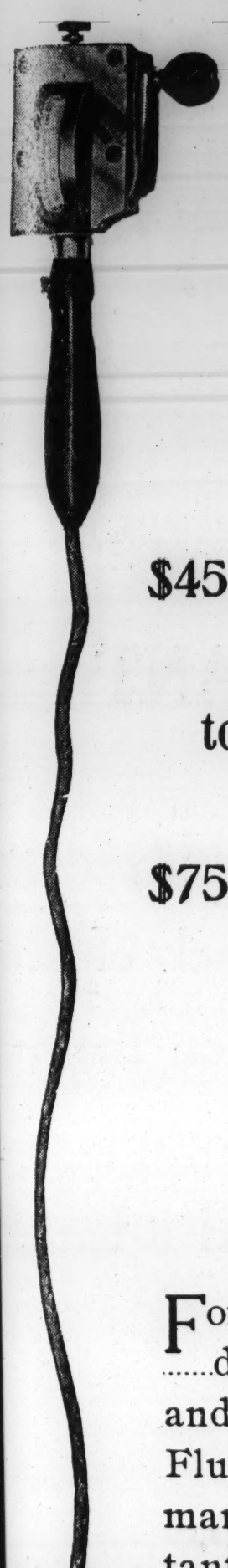
Syrup of Figs and Elixir of Senna is an ethical Proprietary remedy and has been mentioned favorably, as a laxative, in the medical literature of the age, by some of the most eminent living authorities. The method of manufacture is known to us only, but we have always informed the profession fully, as to its component parts. It is therefore not a secret remedy, and we make no empirical claims for it. The value of senna, as a laxative, is too well known to physicians to call for any special comment, but in this scientific age, it is important to get it in its best and most acceptable form and of the choicest quality, which we are enabled to offer in Syrup of Figs and Elixir of Senna, as our facilities and equipment are exceptional and our best efforts devoted to the one purpose.

CALIFORNIA FIG SYRUP CO.

ADDRESSES:

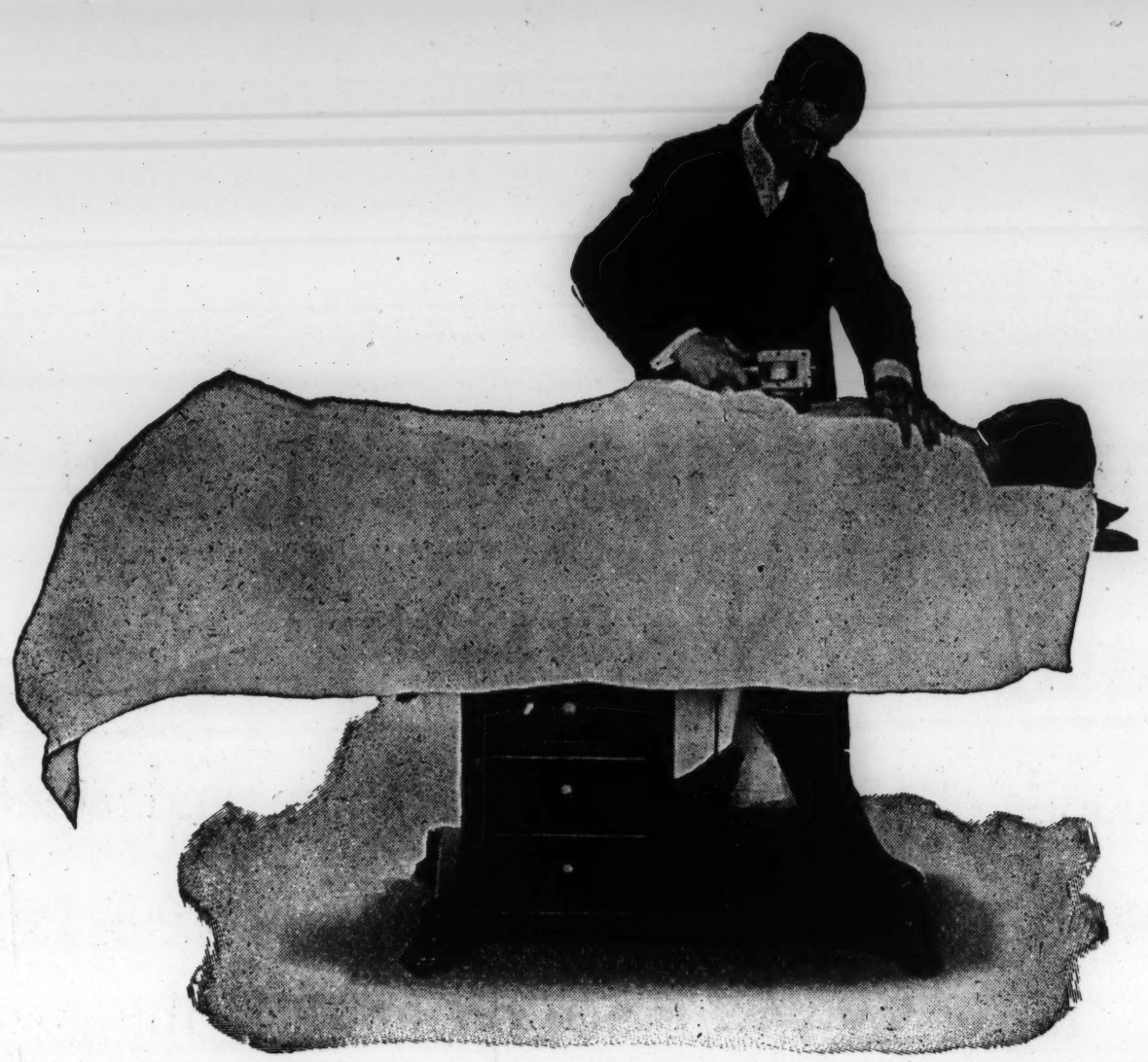
San Francisco, Cal.

Louisville, Ky. **U. S. A.** **New York, N. Y.**



THE PHYSICIAN'S VIBRAGENITANT
AND
FLUID VIBRATODES

$45.00 to $75.00



Delivered to you

Liberal Terms of Payment

Spinal Treatment with Cushion Ball No. 4

For three years clinical results have been proving our claims for .....deep penetration by high frequency vibrations and not by force and pressure. Hundreds of physicians using the Vibragenitant and Fluid Vibratodes for sensitive parts, write us, that they have used many other vibrators before obtaining ours, and that the Vibragenitant with its true vibrations produces the best therapeutic results.

THAT IS WHAT IT IS FOR—RESULTS.

Our 1907 Catalog is full of facts

about vibration and vibrators and will be sent you FREE, on request.

CAN YOU AFFORD NOT TO INVESTIGATE?

THE SAM J. GORMAN CO.

MANUFACTURERS

VIBRATORY AND ELECTRICAL SPECIALTIES

161-163 So Canal St. **Chicago**

IF YOU DON'T SEE WHAT YOU WANT

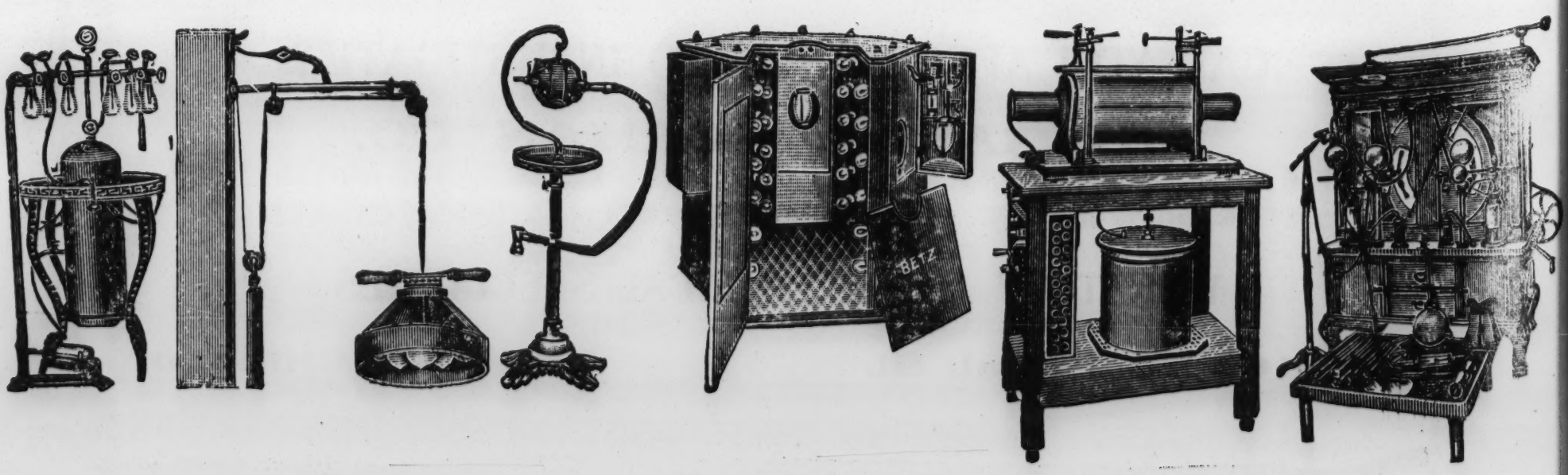
WRITE US

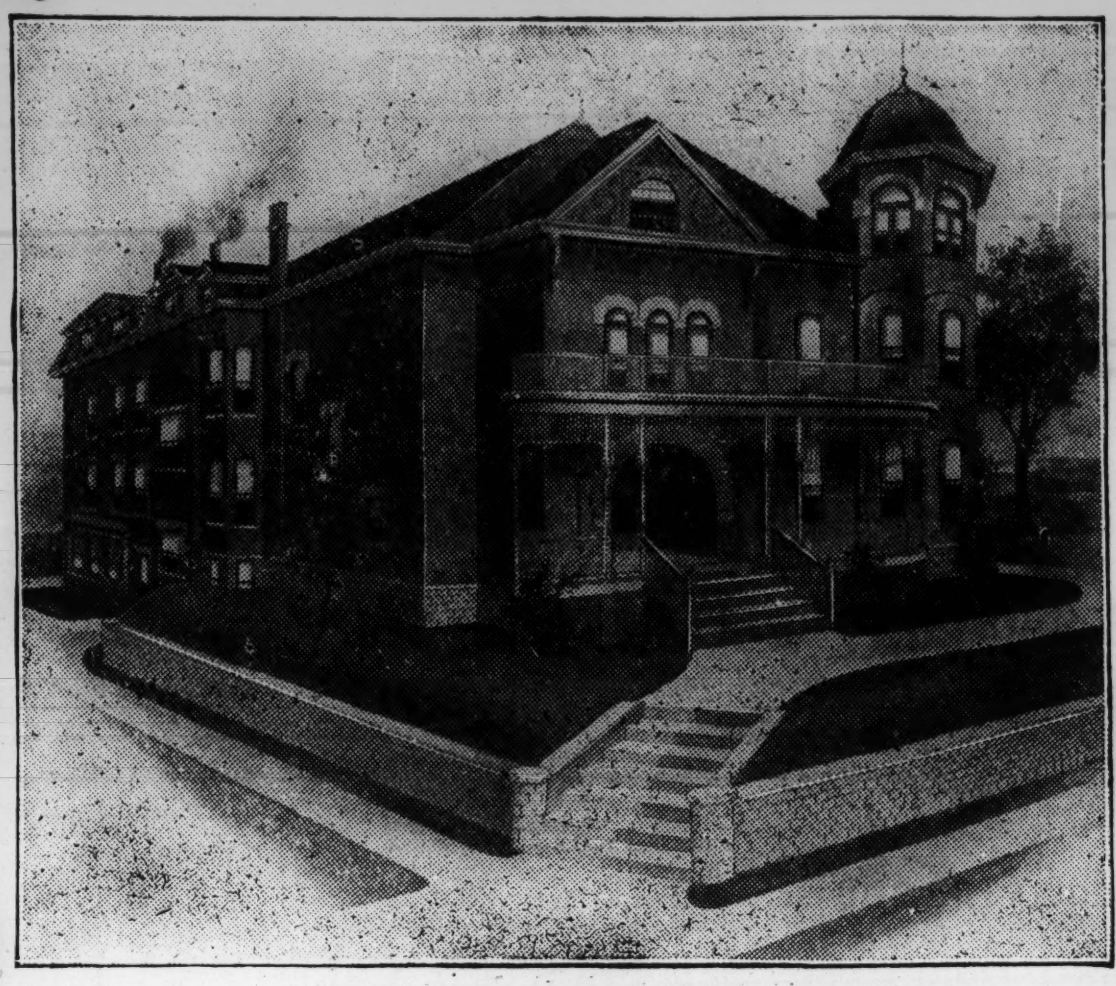
We make thousands of articles. We guarantee and stand back of every thing we make. No firm in the world can meet our prices on the same class of goods. If you buy of us and do not find the goods equal to what any other firm in America could sell you at their high price, send it back.

SEND FOR OUR NEW CATALOGUE.

FRANK S. BETZ CO.

HAMMOND, IND.





The Ralph Sanitarium

For the Treatment of

Alcoholism and Drug Addictions

THE method of treatment is new and very successful. The withdrawal of the drug is not attended by any suffering, and the cure is complete in a few weeks' time. The treatment is varied according to the requirements of each individual case, and the restoration to normal condition is hastened by the use of electricity, massage, electric light baths, hot and cold tub and shower baths vibratory massage, and a liberal well-cooked, digestible diet. A modern, carefully conducted home sanitarium, with spacious surroundings, and attractive drives and walks. Electro- and Hydro-therapeutic advantages are unexcelled. Trained nurses, hot water heat, electric lights. Special rates to physicians. For reprints from Medical Journals and full details of treatment, address

DR. B. B. RALPH 529 Highland Avenue **Kansas City, Mo.**

---

60 YEARS' EXPERIENCE

PATENTS

TRADE MARKS
DESIGNS
COPYRIGHTS &C.

Anyone sending a sketch and description may quickly ascertain our opinion free whether an invention is probably patentable. Communications strictly confidential. HANDBOOK on Patents sent free. Oldest agency for securing patents.

Patents taken through Munn & Co. receive *special notice*, without charge, in the

Scientific American.

A handsomely illustrated weekly. Largest circulation of any scientific journal. Terms, $3 a year; four months, $1. Sold by all newsdealers.

MUNN & Co. 361 Broadway, **New York**
Branch Office, 625 F St., Washington, D. C.

SAL HEPATICA

The original effervescing Saline Laxative and Uric Acid Solvent. A combination of the Tonic, Alterative and Laxative Salts similar to the celebrated Bitter Waters of Europe, fortified by addition of Lithia and Sodium Phosphate. It stimulates liver, tones intestinal glands, purifies alimentary tract, improves digestion, assimilation and metabolism. Especially valuable in rheumatism, gout, bilious attacks, constipation. Most efficient in eliminating toxic products from intestinal tract or blood, and correcting vicious or impaired functions.

Write for free samples.

BRISTOL-MYERS CO.
Brooklyn - New York.

THE ECLECTIC MEDICAL JOURNALS..

	Price
American Medical Journal, 2900 Lawton st., St. Louis, Mo.	$ 1.00
California Medical Journal, 964 Dolores st., San Francisco, Cal.	1.50
Chicago Medical Times, 1495 Madison st., Chicago, Ills.	1.00
Eclectic Medical Gleaner, 224 W Court st., Cincinnati, O.	1.25
Eclectic Medical Journal, 1009 Plum st., Cincinnati, O.	2.00
Eclectic Review, 140 W 71st st., New York, N. Y.	1.00
Ellingwood's Therapeutist, 100 State st., Chicago	1.00
Los Angeles Journal of Eclectic Medicine, 337 Douglas Bldg., Los Angeles, Cal.	1.00
Medical Arena, 1214 Maine st., Kansas City, Mo.	1.00
Medical Harbinger, 910 Lami st., St. Louis, Mo.	.50
Modern Eclecticism, 623 Austell Bldg., Atlanta, Ga.	1.00
Nebraska Physician, Fraternity Bldg., Lincoln, Neb.	1.00
Therapeutics and Dietetics, 703 Washington st., Dorchester Dist. Boston, Mass.	1.00

Eclectic Medical Books

All of the Books below are listed at strictly net Prices.

COOPER, WM. COLBY,	Tethered Truants, 12mo, 200 pages, cloth	$1 00
do do	Immortality, 12mo, 173 pages, cloth	1 00
do do	Preventive Medicine, 147 pages, cloth	1 00
ELLINGWOOD,	Materia Medica and Therap., 8vo, 811 pp. cloth, $5.00; sheep,	6 00
FARNUM,	Orthopedic Surgery, 8vo, 554 pp. cloth	5 00
FELTER-LLOYD,	American Dispensatory, 2 vols. each, cloth, $4.50; sheep,	5 50
FOLTZ,	Diseases of the Eye, 12mo, 566 pp, cloth	2 50
do	Nose, Throat and Ear Illustrated. 12mo., 650 pages, cloth	3 50
FYFE,	Materia Medica and Therapeutics, 12mo, 344 pp. cloth	2 00
GOSS.	The Practice of Medicine, 8vo, 569 pp. cloth	1 50
HOWE.	Fractures and Dislocations, 8vo, 426 pp. cloth, $1.50; sheep,	2 00
do	Operative Gynecology 8vo. 360 pp. sheep	4 00
KING.	Family Physician, 8vo, 1042 pp. morocco	6 50
do	Chronic Diseases, 8vo, 1700 pp. sheep	8 50
do	Am. Dispensatory (Felter-Lloyd), 2 vols, each, cloth, $4.50; sheep,	5 00
do	Eclectic Obstetrics, 8vo, 757 pp. sheep	5 50
do	Diseases of Women, 8vo, 366 pp. cloth $1.50; sheep,	2 00
LLOYD.	Etidorhpa, 8vo, illustrated, 362 pp. cloth	1 50
do	The Right Side of the Car, paper	50
do	Stringtown on the Pike, 12mo, cloth	1 50
do	Warwick of the Knobs, 12mo, 305 pp. cloth	1 50
do	Redhead, illustrated, 12mo, 208 pp. cloth	1 60
do	Scroggins, 12mo, 119 pp. cloth	1 50
LOCKE-FELTER.	Materia Medica, 12mo, 500 pp. cloth	2 50
MUNDY.	Diseases of Children, 12mo, 600 pp. cloth	2 50
MUNK.	Arizona Sketches, 8vo, 230 pp. cloth	2 00
NIEDERKORN,	A handy Reference Book to Specific Medication, 151 pp. leath.	1 25
PETERSEN,	Materia Medica and Clinical Therap. 12mo, 400 pp. cloth	3 00
SCUDDER. J. M.	Eclectic Practice of Medicine, 8vo, 816 pp. cloth, $4.50; sh.	5 00
do	Principles of Medicine, 8vo, 350 pp. cloth, $1.50; sheep	2 00
do	Diseases of Women, 8vo, 534 pp. cloth, $2.75; sheep	3 50
do	Specific Medication, 12mo, 432 pp. cloth	2 00
do	Specific Diagnosis, 12mo, 388 pp. cloth	1 50
do	Materia Medica and Therapeutics, 8vo, 748 pp. cloth, $4.00; sh.	4 50
do	Medicated Inhalations, 12mo, 125 pp. cloth	75
do	Eclectic Family Physician, 8vo, 900 pp. cloth, $3; sh. $4; half mor.	5 00
THOMAS,	Eclectic Practice of Medicine Illus. 8vo, 1033 pp., cloth, $6; sh.	7 00
WATKINS,	Compendium of the Practice of Medicine, 12mo, 460 pp cloth,	2 50
WEBSTER,	Eclectic Medical Practice, 2 vols in 1, 8vo, 1233 pp. cl. $6.50; sh.	7 50
WINTERMUTE,	King's Eclectic Obstetrics, 8vo, 757 pp. sheep	5 50
WILDER,	History of Medicine, 12mo, 946 pp. cloth	2 75
WOODWARD,	Intra-Uterine Medication, 12mo, 208 pp. cloth	2 50

Any book on this list will be sent postpaid on receipt of price by

F. C. MACLEAN,

970 Dolores St., SAN FRANCISCO, CAL.

PASSIFLORA

(DANIEL'S CONCT. TINCT.)

THE TRUE SEDATIVE.

A natural nerve-food containing no morphine, opium or other deleterious ingredient. DANIEL'S PASSIFLORA is the concentrated tincture of the May Pop---a plant of superlative value as a nervine and narcotic---induces natural rest without reaction and imparts a healthful tone to the entire nervous system. DANIEL'S PASSIFLORA is indicated in Nervousness, Insomnia, Hysteria, Neuralgia, Dentition and during Pregnancy and the Menopause.

Write for Literature
Sample Supplied, Physician
Paying Express Charges.

Laboratory of

John B. Daniel, Atlanta, Ga.